

EXAMINATION INFORMATION
CALIFORNIA REGISTERED DENTAL HYGIENIST (RDH) LICENSURE (Rev. 2/05)

Be sure to carefully read all of the following information concerning the conduct of the RDH clinical examination.

GENERAL REQUIREMENTS AND PROHIBITIONS DURING THE EXAMINATION

The following rules must be strictly adhered to throughout the examination. **Candidates who violate any of the following rules or instructions may be declared to have failed the examination.**

1. COMDA will randomly assign each candidate a number, who shall be known by that number throughout the entire examination.
2. The ability of a candidate to read and interpret instructions and examination material is a part of the examination.
3. Candidates may not commit any acts which interfere with COMDA's objective of evaluating professional competence.
4. Candidates must follow all directions relative to the conduct of the examination, including termination of treatment procedures at the scheduled or announced time.
5. Candidates may not assist another in any portion of the examination.
6. Candidates shall not leave the exam area without permission.
7. Candidates shall occupy only the examination space assigned to her or him throughout the entire examination.
8. Absolutely no person other than those who are directly connected with the exam shall be admitted to the exam rooms.

GENERAL DESCRIPTION OF THE EXAM

9. The use of SofScale or like-products is strictly prohibited.

10. A patient shall not be dismissed without the approval and signature of an Examiner.

11. Notes, textbooks or any other informative materials may not be brought into the examination room.

Checklist - What to Bring

Following is a brief checklist of what you must bring to the exam - be sure to refer to more detailed information contained in the following pages about the specific requirements:

- < Valid, unexpired, government photo I.D., such as a driver's license, or you will not be admitted to the exam
- < An acceptable patient, as defined beginning on page 2.
- < A full mouth set of radiographs for each patient presented, which shall consist of 18 radiographs, at least 4 of which must be bitewing, all of which must have been taken within 12 months of the examination. In addition, **a Panoramic x-ray is advisable.**
- < A Medical Health History form for each patient presented, as well as physician clearance or pre-medication, if appropriate.
- < A completed Dental Assistant form
The use of a dental assistant is required to provide high volume evacuation if the candidate chooses to use an ultrasonic device.
- < Scaling, root planing, and other instruments and equipment as listed beginning on page 3 and 4, including both a 3A and 11/12 explorer, aspirating syringe, anesthesia and needles.
- < Blood pressure kit
- < Gown, gloves, mask, and protective eyewear

Each candidate must pass a clinical examination which includes an examination of

a patient and complete scaling and root planing of one or two quadrants.

Scaling and root planing include, but are not limited to, the complete removal of calculus, soft deposits and plaque, and smoothing of the unattached tooth surfaces. Unattached tooth surfaces means the portion of the crown and root surface to which no tissue is attached.

PATIENT ACCEPTABILITY

One acceptable patient shall be provided by each candidate. In the event that a patient is deemed unacceptable by the Examiners, it is the candidate's responsibility to provide another patient that is acceptable.

The candidate's ability to select an appropriate patient is part of the examination.

An acceptable patient must meet the following criteria:

1. **Age.** Minimum age of 18 years.
2. **Health Conditions.** The patient's health condition must be acceptable for periodontal treatment. If conditions indicate a need to consult the patient's physician, the applicant must obtain the necessary written clearance and/or evidence of premedication before the patient will be accepted.

(a) The following conditions require either physician clearance or pre-medication*: Rheumatic Fever, Rheumatic heart disease, heart murmur, mitral valve prolapse, heart defect from birth, prosthetic joint replacement, prosthetic heart valve replacement. ***Pre-medication must be confirmed by presenting the prescription container at the exam.**

(b) The following conditions require physician clearance for periodontal treatment:

(1) Tuberculosis - Patient must also have been on antibiotics for a minimum of four (4) weeks.

(2) High Blood Pressure - If a patient presents at the exam with a blood pressure

exceeding 160 systolic and/or 100 diastolic, a physician's clearance must be presented which includes a statement of the highest blood pressure acceptable for periodontal treatment.

(3) AIDS or HIV - Clearance must state that periodontal treatment is not contraindicated.

(4) Patients who currently receive radiation treatment or chemotherapy.

(5) Sickle Cell Anemia.

(6) Organ transplant.

(7) Long term steroid use.

(8) Pregnancy - Clearance must include clearance for topical anesthesia, local anesthesia, treatment, and radiographs.

(9) Patients who are taking or who have taken prescription diet medications (i.e. Phen-fen, Pondimon, Redux).

3. Hazardous Conditions. A patient with a condition hazardous to the patient, candidate or examiner may be rejected at the discretion of the Examiners which include, but are not limited to:

- a. Patients with a history of hepatitis B, C or D, unless non-carrier medical clearance is provided.
- b. Patients who have had a heart attack, stroke or cardiac surgery within the past six (6) months.
- c. Herpetic lesions in any visible stage or any other transmissible disease.
- d. Acute abscesses, severely inflamed gingivae (purulent, hemorrhagic, retractable, etc.) in the area to be treated.
- e. NUG or ANUG anywhere in the mouth.
- f. Patients with extreme tissue or tooth sensitivity which interferes with proper probing and exploring by the Examiners.

4. Case Options. Candidates may select one of the following patient options:

a. **Option One:**

The patient must have at least 6 natural teeth in one quadrant with:

(1) At least 3 posterior teeth with interproximal probing surfaces (mesial, distal, facial, lingual) of 4-6 mm. Two of these posterior teeth must be molars.

A patient will not be rejected because he/she has one tooth with one probing surface greater than 6 mm, providing it is the only depth greater than 6 mm in the quadrant selected. Only one tooth surface may exceed 6mm in the quadrant submitted.

(2) Demonstrable, explorer-detectable, moderate to heavy ledges of subgingival calculus present on more than half of the subgingival tooth surfaces and there must be some subgingival calculus on every tooth.

Acceptability will be determined on the basis of subgingival calculus. Supragingival calculus or stain is not required.

A minimum of 13 surfaces (mesial, distal, facial, lingual) of moderate to heavy ledges of subgingival calculus on the teeth selected by the Examiners is required.

The 6 natural teeth in one quadrant must be free of the following conditions:

Probing depths greater than 6 mm (**see 1 above**)

Class III furcation

Class III mobility

Gross decay

Faulty Restorations (**which interfere with Examiners ability to explore**)

Orthodontic bands

Overhanging margins

Temporary restorations

Bonded facings or veneers **unless margins are supragingival.**

Crowns/Restorations with smooth supragingival margins are acceptable.

b. Option Two. If a candidate is unable to find a patient with one quadrant who meets the requirements of Option One above, the candidate may provide a patient in whom those requirements (in Option One) can be found in **two** quadrants anywhere in the mouth except that anesthesia shall not be administered to both mandibular quadrants of a patient during the same day.

A candidate who presents such a patient shall

be required to scale all teeth in both quadrants in the same time allotted for scaling one quadrant.

ADDITIONAL EXAM REQUIREMENTS

1. Anesthesia. Each candidate must offer to the patient the option of local anesthetic in the area(s) to be scaled only, except that anesthesia shall not be administered to both mandibular quadrants of a patient during the same day.

2. Photo Identification. Each candidate **must** present a valid, unexpired government photo I.D., such as a driver's license, at registration.

3. Patient Radiographs. Each candidate must provide a full mouth set of radiographs of the patient, which shall consist of 18 radiographs, at least 4 of which must be bitewing. Radiographs must also be provided for back-up patients.

The radiographs must be of diagnostic quality, properly mounted and shall not have been taken more than twelve (12) months prior to the examination at which time they are presented. **The apices of all teeth in the quadrant(s) to be treated must be visible.**

Panoramic radiographs alone are not acceptable, but it is advisable to submit them with the full mouth series.

Digital radiographs are acceptable if printed on photo quality paper and the above requirements are met.

4. Patient Blood Pressure. Candidates are required to take and record a baseline blood pressure at the examination for all patients.

5. Medical Health History/Physician Clearance. Candidates must provide a completed Medical Health History for each patient presented, as well as physician clearance if appropriate. The form should be completed prior to the exam, except for the required information regarding blood pressure and anesthesia.

6. Instruments. Provide, along with

whatever scaling or root planing instruments the candidate intends to use the following:

- a. Color-coded Marquis-type, 3 mm. increment, periodontal probe.
- b. Both a 3A and 11/12 type explorer.
- c. A clear-plane mouth mirror.
- d. All necessary armamentarium for local anesthesia, including anesthesia, needles and an aspirating syringe.
- e. A handpiece and prophy angle, if the candidate wishes to polish. (A Mid-West type handpiece to fit a 4-hole hose fitting will be needed in the clinic.)
- f. Blood pressure kit, since a blood pressure reading is required of all patients.

Since candidates are known by their candidate number during the examination, names, school name, or other identifying information may NOT appear on instruments, clothing, examination forms, or radiographs. The radiographs must contain your candidate I.D. number, patient's name and date of the radiographs.

The following disposable supplies may be available at each examination site, but there is no guarantee: latex gloves, disposable air-water syringe tips, topical anesthetic, gauze, cotton rolls, cotton swabs, headrest covers, suction tips, masks, mouthwash, over gloves, patient bibs, paper cups, saliva ejector tips, foil or ultra wrap, sterilization bags, tray covers, dental floss, surface disinfectant, disposable prophy angles, prophy paste.

7. Ultrasonic Device. The use of an ultrasonic device will be permitted, but will not be required. Those candidates who choose to use an ultrasonic device, must provide their own equipment. COMDA will not be responsible for equipment failure.

8. Dental Assistants. Candidates are required

to provide their own Dental Assistants if they choose to use an ultrasonic device. The Dental Assistant must provide high volume evacuation at all times when the ultrasonic device is being used.

DENTAL ASSISTANT REQUIRED CONDUCT

- High volume evacuation is the only duty to be performed.
- The high volume suction must be in the patient's mouth at all times the ultrasonic device is in use.
- Dental Assistants must at all times comply with OSHA precautions.
- Dental Assistants must wear a full face shield (from top of forehead to chin) and mask at all times the ultrasonic device is in use.
- If it is the Dental Assistant's intent to use a finger, saliva ejector or mouth mirror to achieve better access for proper suction, it is permissible.
- When the Dental Assistant is not providing high volume evacuation, the Dental Assistant must step or roll back from the patient chair.
- The Dental Assistant must leave the cubicle and exit the exam area once the candidate places the patient in line for grading.

The Dental Assistant is not permitted to help the candidate set up their cubicle, clean the cubicle or escort the patient to the grading area. Dental Assistants are prohibited from assisting in any other manner such as using the air/water syringe or perform suctioning when the ultrasonic device is not in use. The dental assistant is prohibited from helping the candidate with any professional decisions. The dental assistant is not to be involved in conversations between the candidate and the Clinic Floor Supervisors.

DENTAL ASSISTANTS WILL BE DISMISSED FROM THE EXAMINATION FOR FAILURE TO COMPLY WITH EXAM GUIDELINES AND THE ULTRASONIC DEVICE WILL BE REMOVED FROM THE CUBICLE.

It is the responsibility of the candidate to ensure that only the services of a dental

assistant or registered dental assistant are used.

The dental assistant who will be providing the services during the exam is not and never has been a:

1. **Registered/Licensed Dental Hygienist**
2. **Registered/Licensed Dental Hygienist in Extended Functions**
3. **Registered/Licensed Dental Hygienist in Alternative Practice**
4. **Dental Hygiene Student**
5. **Military Dental Hygienist or Technician**
6. **Dental Student**
7. **Dentist or Licensed Dentist**

If the above-listed health care professional assisting the candidate is a California licensee, disciplinary action will be initiated.

9. Dress. Candidates must dress appropriately for rendering health care services, consistent with OSHA standards (gown, gloves, mask, and protective eyewear).

Candidates will not be allowed to leave the clinic floor in contaminated clothing. Candidates must bring a bag in which to seal and remove your contaminated gown from the exam, or wear a disposable gown.

CHECK-IN AND ORIENTATION

Check-in and Orientation begin at 7:00 a.m. for the morning session and approximately 12:30 p.m. for the afternoon session.

You will be escorted from the lobby of the dental school to the exam registration and orientation areas. You **MUST** present a valid, unexpired, government photo identification, such as a Driver's License, in order to register and be admitted to the examination. You will be given a badge, which contains your picture and candidate I.D. number. You will be known by your candidate I.D. number only throughout the entire examination.

Following registration, you will be given

orientation instructions, and may be given the opportunity to ask questions.

When you leave the orientation room, you will have approximately 5-10 minutes to get your patient and proceed to the exam clinic.

Restrooms should be used before you and your patient proceeds to the clinic.

CLINIC PREPARATION

You may NOT take any notes or other reference materials into the clinic area, other than the completed patient medical history form mailed to you and the current patient's radiographs. Radiographs and medical history forms of back-up patients are not allowed into the clinic area unless that patient is needed.

Absolutely NO ONE other than you and your patient are allowed onto the clinic floor.

When you reach the clinic, you must locate the cubicle that has your candidate I.D. number on it. Disregard ANY other numbers on the units.

Your candidate I.D. number is the number given to you at registration which appears on the badge given to you at that time. You must occupy the unit corresponding to your candidate I.D. number. Make sure that the forms in your unit contain the candidate I.D. number on your badge. If you find yourself in the wrong cubicle, do NOT change the I.D. number on your examination forms. Contact a clinic supervisor immediately.

Make sure that your patient knows your candidate I.D. number and location of your unit, so that they can return to you in a timely manner.

If you have equipment problems, contact either a clinic supervisor or proctor immediately.

You must obtain permission from a clinic supervisor to leave the clinic for any reason at any time during the course of the examination.

You may NOT begin the examination of your patient until the announcement is made that "you may begin your exam". All candidates will begin the patient evaluation portion of the

exam at the same time.

Until the "start" announcement is made, you may only:

1. Sanitize your unit
2. Set out your disposable supplies. Do NOT set out instruments until after announcement.
3. Take your patient's blood pressure and record it in the space provided on the patient's medical history form.
4. Put your candidate identification number and the date on the front upper right-hand corner of the patient's medical history form.
5. Assure that your patient has signed and dated the medical history form.
6. Pin the Patient badge that has been placed in your cubicle to the patient's right sleeve or to the napkin chain, so that it will remain visible. Do NOT put your I.D. number on the badge.
7. If your patient is non-English speaking, write "non-English" and your candidate I.D. number on the patient bib. Labels stating "Non-English may be available at the check-in table.

Before entering the clinic, you should discuss with your patient the fact that they are not to divulge any personal information about you or themselves to the Examiners, and that Examiners will engage in little or no conversation with them. This is to protect your anonymity and not to be considered rudeness. Your Dental Assistant will not be allowed on the clinic floor until your patient has been accepted. Once your patient has been accepted, you may retrieve your Dental Assistant from the designated waiting area.
USC - 2nd Floor, near patient waiting area
UCSF - 2nd Floor Patient Waiting Area

INITIAL PATIENT EXAMINATION

Once the announcement has been made that "you may begin your exam", you will have exactly 45 minutes to complete your

evaluation.

If your patient is not in line by the announced time, you will automatically fail the examination.

It is not necessary to do an elaborate set-up at this time; you will have time to set up your instruments while the Examiners are checking your patient for acceptability.

1. **Universal Precautions.** You must adhere to universal infection control precautions at all times during the exam. You must wear a gown, gloves, mask, and protective eyewear.

If you choose to use an ultrasonic scaler, a face shield providing coverage from your forehead to your chin is required. Patients are also required to wear protective eyewear.

Sanitize your units before and after working on your patient. Do not spray the glass portion of the lights, as they will break.

2. **Anesthesia.** The type and amount of anesthesia used including the concentration of epinephrine MUST be recorded on the patient's medical history form in the space provided. However, if the patient's medical clearance for a pregnant patient does not specifically allow the type of anesthetic you wish to use (topical or local) you may not use such anesthesia. (see page 3 for more info)

If the Examiners are having difficulty examining your patient because the patient is too sensitive, he/she will be returned to you for anesthetic and then your patient must return to the grading area.

3. **Needlestick Protocol/Instrument Breakage.** Notify the Clinic Supervisor immediately if you are stuck by a needle or instrument. You will be advised at that time of COMDA's needlestick protocol. Stop and immediately notify the nearest Clinic Supervisor or proctor if you have an instrument break in your patient's mouth.

Be sure to dispose of the needles appropriately at the end of the exam. Check the clinic or supply area for the needle destroyer.

4. Performing the Patient Examination. A Clinical Assessment form with your candidate I.D. number will be located in your unit, which includes a section for recording tissue condition and periodontal probings.

Once you have selected the quadrant or quadrants you intend to treat, you must record conditions of the oral tissues and provide an accurate charting of the patient's periodontal probing depths for the quadrant(s) selected.

Enter six measurements for each tooth in the appropriate tooth boxes. You must record probing for all teeth in the quadrant or quadrants you have selected. Any omission will count as an error. Look closely at your chart, and be careful not to confuse the mesial and distal readings.

Record in blue or black ink only. No other colors or pencils are allowed.

If you want to keep your probing depths for reference during the exam, transfer them to another piece of paper, since the Clinical Assessment form will not be returned to you. Your probing measurements will be graded, so record them as accurately as possible. Be sure to take your measurements with the same probe or probes you send in to be used by the Examiner, since measurements on probes sometimes vary.

PRESENTING THE PATIENT FOR ACCEPTABILITY AND GRADING

Your patient **MUST** be in the check-in line by the time announced for completion of this portion of the exam. Have your patient rinse with mouthwash, then escort him or her to the check-in line area with:

1. Clinical Assessment Form and Patient Medical History form.
2. Both 3A and 11/12 type explorers. Make sure that each is long enough and of such a contour that it will reach the pocket depth.

3. Mouth mirror.
4. Marquis-type, color coded perio-probe.
5. Patient's radiographs. Full mouth consisting of at least 18 films - 4 of which must be bitewing. All the teeth including the apices in the quadrant must be visible.

It is advisable to submit panoramic radiographs with the full mouth series.

No identification other than your I.D. number may appear on the forms, instruments or radiographs.

When you hand your instruments to your patient to take to the examining area, please be sure that they are clean and wrapped in the numbered sterilization envelope which has been provided to you in your cubicle. Ask your patient to hold them securely, so that they will not fall out of the envelope.

Patients shall not be admitted to the grading area for evaluation with recording devices, earphones, headsets, cellular phones, pagers, etc.

During the examination, you will not have direct contact with the grading Examiners, so escort your patient only as far as the control desk and return to your assigned unit and complete your set-up procedure.

DETERMINING ACCEPTABILITY AND GRADING OF THE PATIENT EXAMINATION

Your patient will be escorted to the Examiner's area of the clinic (which is separate from the candidate's area), where your assessment will be evaluated by the next available examiner who will:

1. Review the Clinical Assessment Form for completeness and accuracy.
2. Review the radiographs for overall pathology and faulty restorations or overhangs, impacted teeth, gross caries, missing teeth, etc.

3. Examine the selected quadrant(s) to verify that it/they meet the "Criteria for Acceptable Patients".
4. Evaluate the periodontal probings for accuracy.
5. Final selection of teeth to be graded will be left to the discretion of the examiner.

The Examiners will make the final determination on the acceptability of your patient. **The Examiner's decision is final.**

Once the Examiners have made an evaluation of your case, the patient will be sent back to you to complete the scaling and root planing portion of the exam, so be sure he/she knows the location of your unit.

The time by which you must have completed the scaling and root planing portion of the exam will appear on the medical history form when your patient returns to you. If your patient is not accepted, you will be notified and it will become your responsibility to choose another patient or another quadrant in the same patient. You may also add a quadrant to the unacceptable quadrant to exercise Option #2 of the guidelines.

If a patient is not accepted, his/her radiographs will be marked by exam administrators. If you choose another quadrant in the same patient, please inform the clinic supervisor. If your patient is rejected, and you will be using another patient, you must take the "patient" badge from the first one and pin it on your alternate patient.

When you bring in your alternate patient to the line for check-in, inform the proctor so your patient will be placed in the front of the line. This is important because your examination time has already begun.

Your alternate patient may be someone you don't know. Be sure to check his/her health history. Blood pressure is required for all patients including alternate patients. Do this promptly, because your examination time begins when your first patient has been checked, whether accepted or rejected. Full

mouth radiographs are required for all patients including all alternate patients.

PATIENT SCALING AND ROOT PLANING

The scaling and root planing portion of the examination must be completed within 2 hours from the time of grading of your initial patient's evaluation. The time by which you must finish will be recorded on the patient's medical history form.

You must scale and root plane the entire quadrant(s) in the two-hour examination period.

You must remove all deposits with minimum tissue trauma. Polishing of the teeth is not part of the examination and will not be evaluated.

Your patient will be checked by at least two Examiners, so if you have chosen to work without anesthetic or if the anesthetic has worn off, you may need to administer more anesthetic. If you do so, you must make note of the type and amount administered on the patient's medical history form. It is not required that you spend the full 2 hours to complete the examination.

When you have finished, have your patient rinse with mouthwash. Escort your patient to the check-in area with a clean drape, clean mouth mirror, 3A and 11/12 type explorers, marquis-type color coded probe, patient's radiographs and the patient's medical history form.

You **MUST** be finished, have your patient in line, and have the medical history form time-stamped at the control desk by the time indicated on the time stamped on your patient's medical history form. **If you do not have your patient in line and have the medical history form time-stamped at the control desk by the time stamped on your patient's medical history form, you will FAIL the examination.**

You must see a clinic supervisor to have your check-out time stamped on the patient's medical history form before placing your

patient in line for check-out. Allow time for this.

As a courtesy, exam personnel will attempt to give you a 15-minute warning, but ultimately it is your responsibility to manage your exam time. The official time on the time clock will be announced at the beginning of the examination.

GRADING OF SCALING AND ROOT PLANING

Actual grading will be done by two Examiners. They will grade independently and only errors found by both Examiners will be counted against you.

Gross mutilation of hard or soft tissue shall result in a grade of zero and shall constitute failure of the examination.

Scoring is based on 100 points. A minimum score of 75 points is required for passing. Points will be deducted from 100 as follows:

1. Periodontal Probing:

+ or - 2 mm. will be considered an error. Four (4) points will be deducted for each error.

2. Scaling and Root Planing:

Six (6) points will be deducted for each subgingival calculus error if there are 13 to 18 surfaces of calculus at check-in.

Five (5) points will be deducted for each subgingival calculus error if there are 19 to 24 surfaces of calculus at check-in.

Three (3) points will be deducted for each supragingival calculus error.

3. Trauma:

Five (5) points will be deducted for each hard and/or soft trauma error. Gross trauma is defined as flagrant abuse or harm to a patient constituting an automatic failure of the

examination. Gross trauma is defined as, but not limited to a deep laceration, long laceration and/or puncture to soft tissue and/or bone. A deep or long laceration is defined as a cut so large, it may require suturing, or a cut so large it extends across more than one tooth surface and/or exposing bone.

CLEAN-UP

Thoroughly clean your unit, and properly dispose of all items. Your gown(s) must be placed in a bag and sealed before leaving at the end of the exam, or disposed of in the clinic.

You must return your candidate badge at the end of the exam, or your examination results will not be sent to you.

RESULTS OF THE EXAMINATION

The results of the examination will be mailed to all candidates approximately six (6) weeks after the exam. Do not phone COMDA before this time, since staff is not permitted to give results over the telephone.

Licenses will not be issued without criminal history clearances from the Department of Justice and the Federal Bureau of Investigation.

LOCAL ANESTHETICS MAXIMUM RECOMMEND DOSE**

Dosages indicated are the maximum suggested for normal healthy individuals and should be decreased for debilitated or elderly patients. Maximum dosages are rounded to the nearest half cartridge.

AMIDES

Lidocaine:	Xylocaine, Alphacaine, Octocaine
Mepivacaine:	Carbocaine, Arestocaine, Isocaine, Polocaine
Prilocaine:	Citanest, Plain, Forte
Bupivacaine:	Marcaine
Etidocaine:	Durnest
Articaine:	Ultracaine, Plain, Forte

AMIDES: MAXIMUM DOSAGES

anesthetic	mg/lb	maximum mg.	maximum cartridges
Lidocaine 2%	2.0	300	8
Mepivacaine 3%	2.0	300	5.5
Mepivacaine 2%	2.0	300	8
Prilocaine 4%	2.7	400	5.5
Bupivacaine 0.5%	0.6	90	10
Etidocaine 1.5%	3.6	400	15
Articaine 4%	3.2	500	7

MILLIGRAMS PER CARTRIDGE

concentration	.5%	1.0%	1.5%	2.0%	3.0%	4.0%
mg/cartridge	9mg.	18 mg	27mg	36mg	54mg	72mg

**As with all local anesthetics, the dosage varies depending on the area to be anesthetized, the vascularity of the tissues, individual tolerance, and the techniques of anesthesia. The lowest dose needed to provide anesthesia should be administered. Maximum doses assume a vasoconstrictor is utilized with the anesthetic.

{From Handbook of Local Anesthesia, Malamed, Stanley, fourth ed., 1997, with additions}

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